PATENT APPLICATION FEE DETERMINATION RECOR								Application or Docket Number					
Effective October 1, 2001									16	7	268	2	
RCE CLAIMS AS			(Column		46/02			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS							F	ATE	FEE	7 1	RATE	FEE	
FOR			NUMBER FILED		NUME	BER EXTRA		SIC FE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			โ ⊭ เกโกษร 20≖		*	x		\$ 9=	<u> </u>	OR	X\$18=		
INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PI			→ minus 3 =		<u> </u>			X42=		OR	X84=		
L	JLTIPLE DEPE	NDENT CLAIM P	HESENT			+140		140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							T	OTAL		OR	TOTAL		
	C		MENDE	MENDED - PART II				4 A 1 1	ENTITY		OTHER SMALL		
		(Column 1) CLAIMS	(Column 2) (Column 3			(Column 3)]	MALL			SWALL :		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVK PAID	DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.35	Minus	#.5		=	X	\$ 9=		OR	X\$18=		
	Independent	* DEMI	Minus	PENDENT	CLAIM		×	42=		OR	X84=	420	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+1	40 =.		OR	+280=		
								TOTAL T. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colur	nn 2)	(Column 3)	700	1. 7 LL			ADDII. FEE	72-	
AMENDMENT B		CLAIMS REMAINING		HIGH		PRESENT			ADDI-	1 1		ADDI-	
		AFTER AMENDMENT		PREVK	DUSLY	EXTRA	R.	ATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**		=	X	9=		OR	X\$18=		
	Independent FIRST PRESE	* ENTATION OF MI	Minus	PENDENT	CLAIM	-	×	12=		OR	X84=		
							+1	40=		OR	+280=		
								T. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colur		(Column 3)							
AMENDMENT C		CLAIMS REMAINING		HIGH		PRESENT			ADDI-	1		ADDI-	
		AFTER AMENDMENT		PREVIO	DUSLY	EXTRA	R/	TE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	* NTATION OF MI	Minus	PENDENT	CLAIM	-	X4	2=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							10=		OR	+280=		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							OTAL			TOTAL		
will the "Highest Number Previously Pald For" IN THIS SPACE is less than 3, enter "3."													
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
FORM PTO-978 (Rev. 8/01) Patient and Trademark Office LLS, DEPARTMENT OF COMMERCE													